

HR 5327

Mental Health Awareness and Improvement Act of 2016

Congress: 114 (2015–2017, Ended)

Chamber: House

Policy Area: Health

Introduced: May 25, 2016

Current Status: Referred to the House Committee on Energy and Commerce.

Latest Action: Referred to the House Committee on Energy and Commerce. (May 25, 2016)

Official Text: <https://www.congress.gov/bill/114th-congress/house-bill/5327>

Sponsor

Name: Rep. Kuster, Ann M. [D-NH-2]

Party: Democratic • **State:** NH • **Chamber:** House

Cosponsors (1 total)

| Cosponsor | Party / State | Role | Date Joined |
|------------------------------------|---------------|------|--------------|
| Rep. Mooney, Alexander X. [R-WV-2] | R · WV | | May 25, 2016 |

Committee Activity

| Committee | Chamber | Activity | Date |
|-------------------------------|---------|-------------|--------------|
| Energy and Commerce Committee | House | Referred To | May 25, 2016 |

Subjects & Policy Tags

Policy Area:

Health

Related Bills

| Bill | Relationship | Last Action |
|------------|--------------|---|
| 114 S 2680 | Related bill | Apr 26, 2016: Placed on Senate Legislative Calendar under General Orders. Calendar No. 437. |
| 114 S 1893 | Related bill | Jan 8, 2016: Referred to the Subcommittee on Health. |

Mental Health Awareness and Improvement Act of 2016

This bill amends the Public Health Service Act to expand the focus of a youth interagency research, training, and technical assistance resource center from youth suicides to suicide at any age, particularly among groups at high risk for suicide. The center is reauthorized through FY2020.

This bill revises and extends through FY2020 grant programs for: (1) the development of state or tribal youth suicide early intervention and prevention strategies, (2) enhancement of services for students with mental health or substance use disorders at institutions of higher education, and (3) training school personnel to recognize symptoms of childhood and adolescent mental disorders and safely de-escalate crisis situations involving individuals with a mental illness.

The grant program to address violence-related stress must support the continued operation of the National Child Traumatic Stress Initiative (NCTSI). The NCTSI coordinating center must report on child treatment and outcomes and facilitate training in evidence-based and trauma-informed treatments, interventions, and practices.

The Government Accountability Office must report on access to treatment of mental health and substance use disorders, prescription of psychotropic medications to children, and the implementation of recommendations made in "On Issues Raised by the Virginia Tech Tragedy."

The Substance Abuse and Mental Health Services Administration (SAMHSA) may advance awareness of products approved by the Food and Drug Administration to treat opioid use disorders. (Opioids are drugs with effects similar to opium, such as certain pain medications.)

SAMHSA must provide technical assistance to grantees regarding evidence-based practices for the prevention and treatment of geriatric mental health disorders and co-occurring mental health and substance use disorders, as well as disseminate information about such practices.

The Centers for Disease Control and Prevention is encouraged to improve the National Violent Death Reporting System.

Actions Timeline

- **May 25, 2016:** Introduced in House
- **May 25, 2016:** Referred to the House Committee on Energy and Commerce.